Entry Blank Blassa Type or Brint > 45 They to be
Entry Blank—Please Type or Print > father w. br
Mr./Artist BERGH, SUSAN BERG
(last name last)
Permanent 323 6 WARRINGTON RO. SHAKON HEICHTS 6H10 44115 Daytime Tel. (216) 5.61.6799
SHAICON Street City City
6 H 10 44115 Daytime Tel. (216) 561.6799
Zip
Temporary or
Studio AddressStreet City
Daytime Tel. ()
Zip area
If you do not presently live in one of the counties of the Western
Reserve, in which county were you born?
Collaborator (if any)
If May Show entries are not accepted or are not sold:
Artist will pick up at Museum.
 ☐ Museum should dispose of. ☐ Museum should ship to artist at artist's expense:
Street
City State Zip
Special Instructions
Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.
When necessary, include instructions or a drawing for assembling and displaying an object.
Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by
the dates given herein. It is also understood that accepted objects will remain on exhibition until August 6, 1989.
The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.
Signature Susan Bager
Signature Swign
I have received the unread/unaccepted chicat/() in good condition
I have received the unsold/unaccepted object(s) in good condition.
Signature

Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

A Pain			Photography (specify category)			
Materials used (media	a):					
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· COLOR	L PEIN-	TIM	6			
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B □ Paintings □ Graphics □ Photography □ Sculpture □ Crafts (specify category)						
Materials used (media	a):					
Title						
Price or NFS	Insurance Value If NFS Only		Size height x width x depth			
	GRAPHICS AND PHO	TOGRAPH	Y ONLY			
Additional No. For Sale	Total No. in Edition	Price of Print Unframed		Price of Frame Only		
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NOT ACCEPTED			NOT ACCEP	TED	DATE	